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Substitute for Form PTO-875								10	1956,	400
CLAIMS AS FILED – PART I (Column 1) (Column 2)							L ENTITY	/ OR -		R THAN ENTITY
FOR NUMBER F			R FILED	NUMBER EXTRA		RATE	FEE	]	RATE	FEE
(37 (	IC FEE CFR 1.16(a))	/					\$	OR		s
	AL CLAIMS CFR 1.16(c))	1/8	minus 20 = *			× s	= [	OR.	x s=	
	PENDENT CLAIN FR 1.16(b))	AS 7	minus 3 = ·			× \$	=	OR	x \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+ \$	=	OR	+ \$=		
* If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TOTAL	
CLAIMS AS AMENDED – PART II										
(Column 1) (Column 2)			(Column 3)	SMAI	L ENTITY	OR.		R THAN ENTITY		
⋖	1/1	CLAIMS REMAINING		HIGHEST NUMBER	PRESENT	RATE	ADDI-	]	RATE	ADDI-
AMENDMENT	1/2/01	AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		TIONAL FEE			TIONAL FEE
DM	Total 37 CFR 1.16(c))	23,	Minus	20	3	x \$	=	OR	× s_50=	15000
AËN	Independent (37 CFR 1.16(b))	. 4	Minus	3	= /	x \$	= '	OR	x \$ <del>200</del> =	20000
Ā	FIRST PRESENT	ATION OF MULTIPL	E DEPENDI	ENT CLAIM (37 CF	R 1.16(d))	+ \$	=	OR	)+ s\=	b
						TOTAL ADD'L FE	<b>.</b>	OR /	TOTAL ACCULACE	35000
(Column 1) (Column 2) (Column 3)								- Y		-
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	] /	RATE	ADDI- TIONAL FEE
ME	Total (37 CFR 1.16(c))	*	Minus	**	=	x s	=	OR	x \$=	
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Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$	=	OR	+ \$=	
						TOTAL ADD'L FE	Ξ	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)								_		
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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AMENDMENT	Independent (37 CFR 1.16(b))	*	Minus	***	=	x \$	=	OR	× \$=	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						=	OR	+ \$=	
						TOTAL ADD'L FE	≣	OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".										
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in cournin i.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.